# Patient Voice to Inform and Improve Family-Centered Clinic and Community Systems Related to Perinatal Opioid Use

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## BACKGROUND

- Maternal opioid use disorder (OUD) is the leading cause of first-year postpartum maternal mortality.

- MOUD contributes to poor maternal, infant, and family outcomes.

- Pregnant and parenting patients with OUD face stigma, access barriers, and difficulty coordinating care. CADENCE (Continuous and Data-Driven Care) integrates evidence-based prenatal, postpartum, pediatric, addiction medicine, and behavioral health care, consolidating data to evaluate associated outcomes.



## METHODS

- Clinic and community process mapping was used to understand clinic flow, referral patterns, and patient experiences across three prenatal, pediatric, and office-based opioid therapy clinics.

- Maps were constructed with results from steering committee workshops, clinic observations, interviews with providers, staff, and patients, and the CADENCE Advisory Committee of parent leaders with lived experience of perinatal OUD.

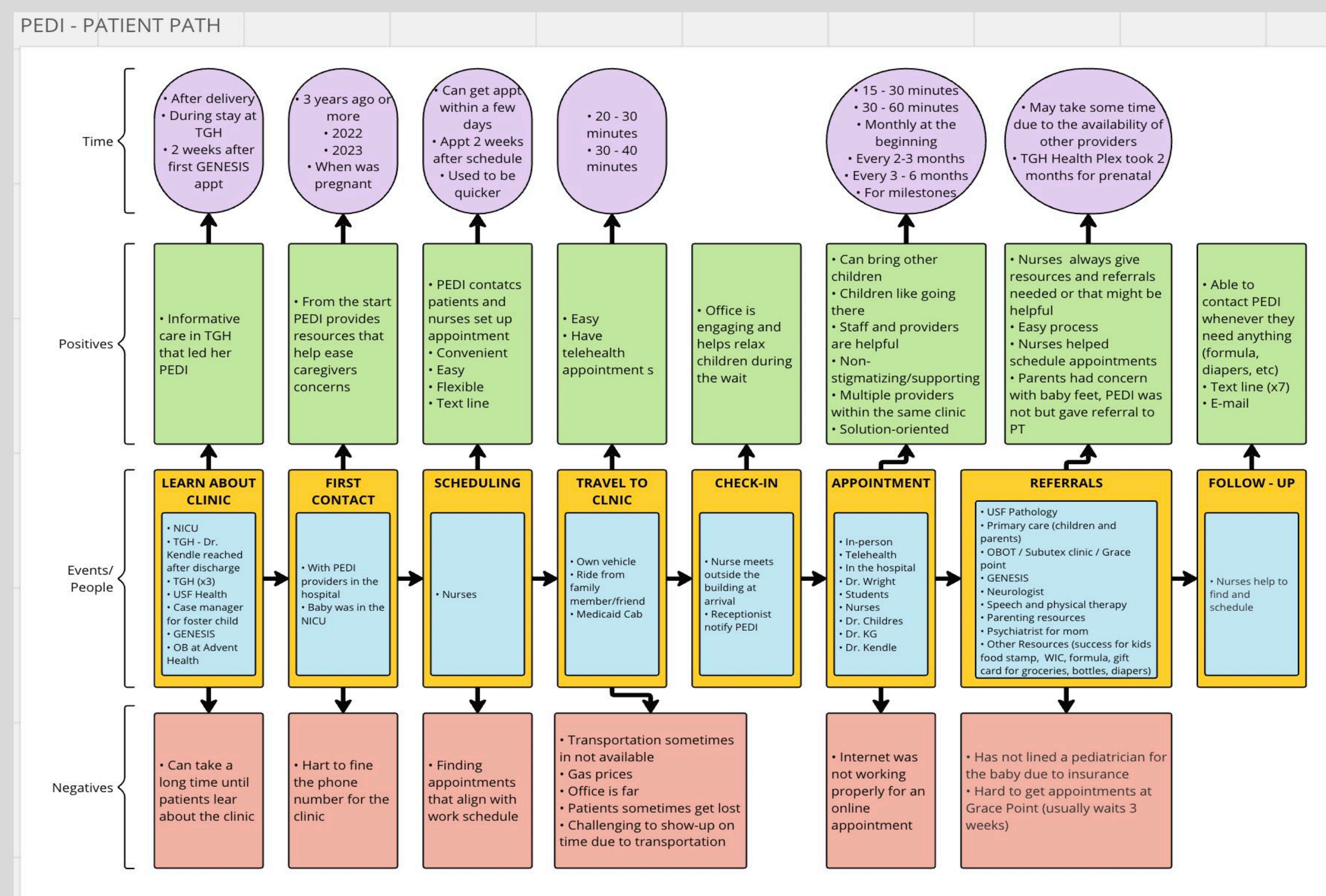- A social network survey aimed further to illustrate interagency referrals and collaboration.
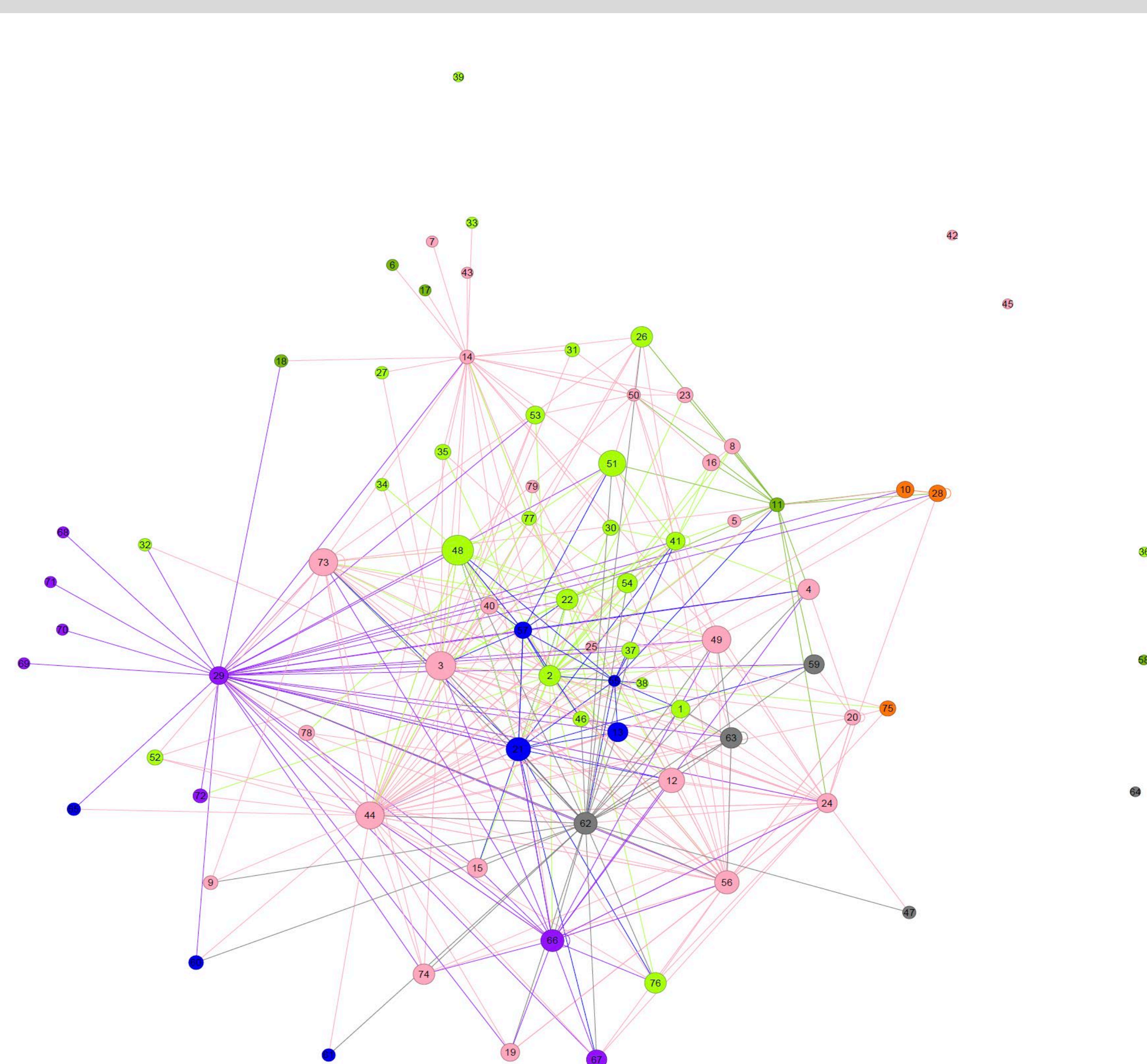
## RESULTS

### Clinical process map – PEDI Clinic
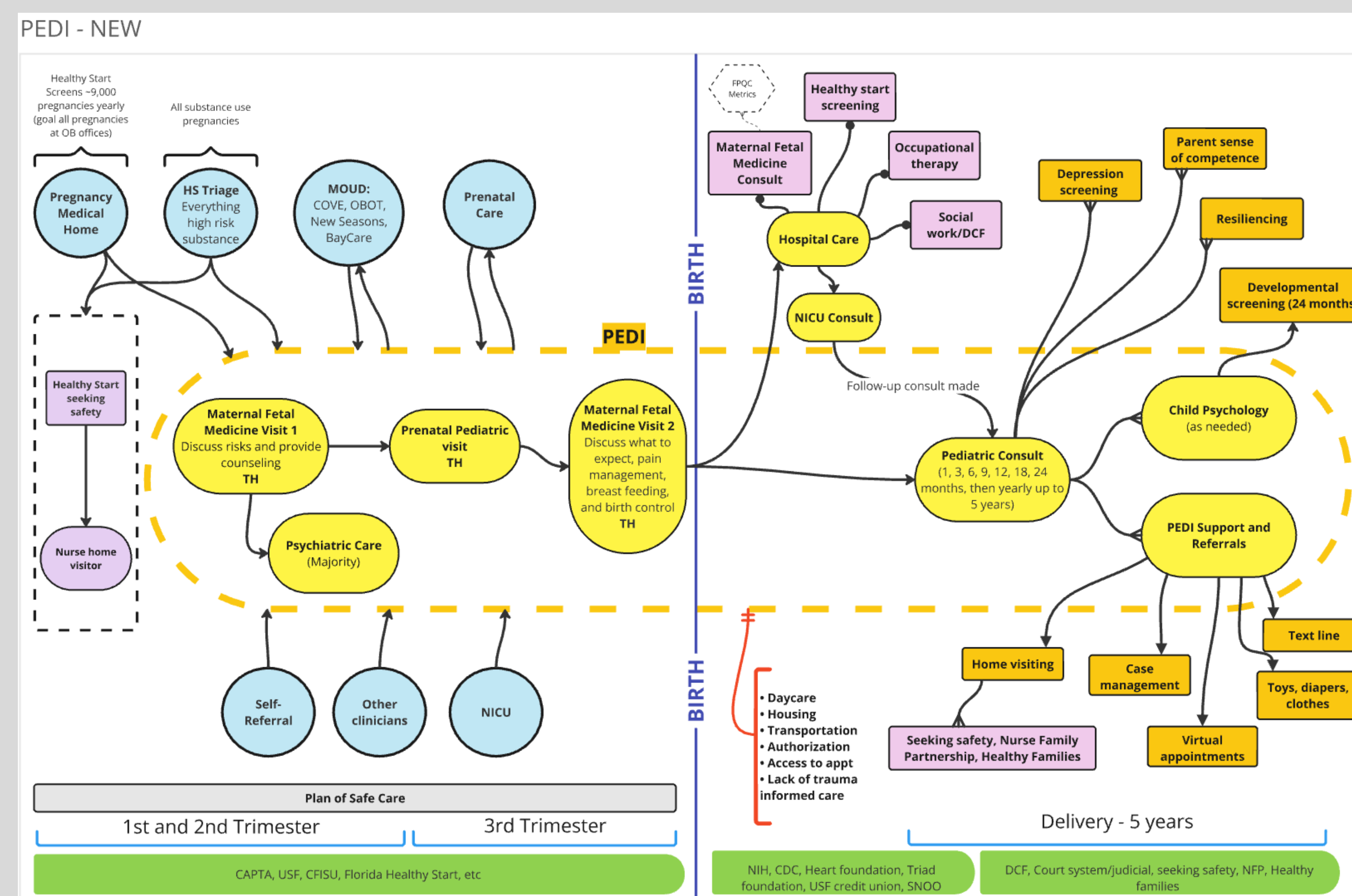


### Patient journey map: Patient's perspective



### Social network analysis



### Advisory Committee

- Would be nice to celebrate the parent's recovery 'Congratulations on your recovery. How do you like the program so far? How can I help?'
- "No one cares about you until you are pregnant."
- It can take months, multiple calls to find a willing prenatal care provider.
- A person may or may not choose to disclose OUD to others (family, friends, pediatrician).
- It requires bravery to disclose, the person may feel judged and often experience micro-aggressions
  - It is important to talk about substance use/recovery, but HOW providers ask or talk about it matters.
  - Some providers offer encouragement, know how to listen and read between the lines to know what's needed, an provide resources.
- Inner healing can help break cycles of addiction - to address the "why" of use.
  - Used to think only medical or mental health professionals could help with mental health support… Important to have someone on your team to support you, regardless of who it is.
  - Professionals need to go slowly and build trust.
  - Important to have support people who push you, not just agree.

## DISCUSSION

- Clinical process and patient journey maps reflecting input from 31 patients, 8 parent advisors, 27 staff, and 20 steering committee members illustrated pathways within and between clinics, shedding light on patient flow, experiences, needs, and preferences.

- Areas for improvement included screening and disclosure, addressing medical stigma, peer support, referrals to family support services, access to medications for OUD, behavioral health care, and improving awareness, sensitivity, and understanding of OUD and recovery among all healthcare staff and providers.

- Identification of ~400 resources statewide and a network survey of 30/73 local agencies contributed to a broader understanding of patients' access to CADENCE clinics and other supports.

- Results also highlighted the limited awareness of families affected by OUD who rely on community-based family support organizations or crisis services (i.e., "we don't serve that population").

## IMPLICATIONS

- These results have informed a clearer conceptualization of the CADENCE pathway versus traditional siloed care and have ignited quality improvement efforts (screening [SBIRT], referral {Jail Pathway}, and timely access to care [time to first prenatal appointment for OUD-related referrals]).

- Consideration of both patient-centered and family-centered care will improve enrollment, retention, and quality